

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	VT	60607	6/12/00
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	21	7353	8/23/00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) ... Canceled
 ÷ Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
1	✓	✓	6/12/00
2	✓	✓	6/12/00
3	✓	✓	6/12/00
4	✓	✓	6/12/00
5	✓	✓	6/12/00
6	✓	✓	6/12/00
7	✓	✓	6/12/00
8	✓	✓	6/12/00
9	✓	✓	6/12/00
10	✓	✓	6/12/00
11	✓	✓	6/12/00
12	✓	✓	6/12/00
13	✓	✓	6/12/00
14	✓	✓	6/12/00
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47	✓	✓	6/12/00
48	✓	✓	6/12/00
49	✓	✓	6/12/00
50	✓	✓	6/12/00

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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